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06/02/2003 7590

R Neil Sudol Coleman Sudol Sapone, P.C. 714 Colorado Avenue Bridgeport, CT 06605-1601



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Judith Muzyk	(Depositor's name)
Sudith Priesul	(Signature)
September 2, 2003	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/514,928	02/28/2000	Peter J. Wilk	W07-428	9269

TITLE OF INVENTION: ULTRASONIC MEDICAL DEVICE AND ASSOCIATED METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE TOTAL FEE		DATE DUE
nonprovisional	YES	\$650	\$0 \$6		09/02/2003
ЕХАМГ			CLASS-SUBCLASS		
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Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		Correspondence or sir	the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2		<u>leil Sud</u> ol y D. Coleman
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			gistered patent attorneys or age listed, no name will be printed.		iam J. Sapone

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Wilk Ultrasound of Canada, Inc.

Ontario, Canada

4. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
✓ Issue Fee	☑ A check in the amount of the fee(s) is enclosed.				
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(Authorized Signature)	1 -	(1	(Date)		
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NOTE; The Issue Fee other than the applica	and Publica int; a register	fion Fee (if red attorney	required) will not be acce or agent; or the assignee	pted fro or oth	om anyone
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